

**REFERENCE FORM**  
**Tennessee Board of Examiners for Land Surveyors**

Reference or Experience Verification Forms must be furnished to three licensed land surveyors as listed in item 15 of your application. ***This form is for reference only and does not require verification of experience.***

1. Name of applicant \_\_\_\_\_
2. What is your opinion of the applicant's personal integrity and general character? \_\_\_\_\_

3. Using the interpretations below, how do you rate the practice and quality of performance of the applicant's land surveying work?

**INTERPRETATIONS:**

Above Average: Performance unquestionably of a professional level demonstrating thorough competence and creative ability.  
Average: Work not distinguished in content, but indicating, under some supervision, the ability to protect life, health and property.  
Below Average: Performance needs careful checking and rather close supervision to meet requirements.  
Unsatisfactory: Work of poor quality, not up to minimum professional standards. Requires review and revision by associates or supervisors before execution. Is inadequate for "the purpose of safeguarding life, health and property."

Job Functions	Above Average	Average	Below Average	Unsatisfactory
Field Duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office Duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planning and Preparation Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Considering the need to protect the public health, safety, and welfare, in your opinion, how does this applicant rank in professional competence and responsibility?

☐ Highly Qualified      ☐ Minimally Qualified      ☐ Unqualified

5. Based on the definition of the practice of land surveying and professional responsibility under the rules of the State of Tennessee, do you recommend the applicant for PLS licensure? ☐ Yes    ☐ No

6. REMARKS: The Board will appreciate any additional information or amplifying information regarding the applicant's surveying experience, capabilities, or limitations, if any (use a separate sheet if necessary):

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I certify that the above statements are true and correct to the best of my knowledge, not made for the purpose of aiding an unqualified applicant to become licensed, but with full realization of the responsibility toward the public where the safeguarding of life, health and property is concerned or involved.

Print Name \_\_\_\_\_ State of PLS License \_\_\_\_\_ License # \_\_\_\_\_ Expiry Date \_\_\_\_\_

Employer \_\_\_\_\_ Present Position \_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Please affix seal with signature)